

ISSUE SLIP . . . . . AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH		6/1/8
O.I.P.E. CLASSIFIER		43	6/27/81
FORMALITY REVIEW	cy	1622	18/07-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

. . . . . Rejected  
 . . . . . Allowed  
 . . . . . Canceled  
 . . . . . Restricted  
 N . . . . . Non-elected  
 I . . . . . Interference  
 A . . . . . Appeal  
 O . . . . . Objected

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Claim	Final	Original
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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